No.2026215 *Registered No. N. E. 930.*

TRIPURA GAZETTE

Published by Authority

EXTRAORDINARY ISSUE

Agartala, Thursday, February 12, 2026 A. D. Magha 23, 1947 S. E.

PART -- II Advertisements and Notices

BEFORE THE NOTARY PUBLIC
AGARTALA :: WEST TRIPURA

Annexure-I

FORMAT OF AFFIDAVIT FOR TRIPURA STATE GOVERNMENT EMPLOYEE
FOR CHANGE OF NAME/SURNAME

BY this affidavit, I the undersigned **MOMIN ALI** S/O LATE BABUL MIA, Resident of Kalachand Para, South Hurua, P.O:-South Hurua, PS-Dharmanagar, Sub-Division:-Dharmanagar, City:-Dharmanagar, Dist:-North Tripura, Pin Code-799251, lately called MD. MOMIN ALI (Former Name) employed as Multi Tasking Staff in the Public Works Department(PWD), Office of the Sub-Divisional Officer, Stores Sub-Division, Dharmanagar, North Tripura under Office of the Executive Engineer, Stores Division, PWD(R&B), A.D Nagar, Agartala, Govt. of Tripura (place where employed in the Department/Office of the State Government) do hereby:

1. Wholly renounce, relinquish and abandon on the use of my former name/surname of **MD. MOMIN ALI** and in place thereof do assume from this is date thereof the name of **MOMIN ALI** and so that I may hereafter be called, known and distinguished not by my former name of **MD. MOMIN ALI** but by my assumed name of **MOMIN ALI.**

2. For the purpose of evidencing such my determination, declare that I shall at all times hereafter in all records, deeds and writings and in all proceedings, dealings and transactions private as well as public and upon all occasions whatsoever use and sign the name of **MOMIN ALI** as my name in place of and in substitution of my former name of **MD. MOMIN ALI.**

Momin Ali

3. Expressly authorities and request all persons at all times hereafter to designate and address me by such assumed name of **MOMIN ALI.**

4. In witness whereof I have here unto subscribed my former and adopted name of **MD. MOMIN ALI** and **MOMIN ALI and my signature and seal the 08th day of January, 2026.**

The Contents of the Affidavit are read ove and Explained to the Deponent/Deponents the Deponent / Deponents has / have acknowledge the contents and has/Have Signed/put the thumb impression in this Affidavit and He/She/They are identified by me.

Advocate.

Old Signature Md. Momin Ali

New Signature Momin Ali

Signed and delivered by the above
Name: **MOMIN ALI**
Formerly: **MD. MOMIN ALI**
in the presence of

Witness No. 1

Signature _____ 08/01/26

Name _____

Designation _____

Official Address _____ Er. SARIKA DEBBARMA
TES, Gr.-IV
PWD (R&B), Stores Sub-Division,
A.D. Nagar, Agartala.

(with Rubber Stamp)

Witness No. 2

Signature _____

Name _____ 08.01.2026
SDO, PWD (R&B)
Central VIII Sub-Divn.
A.D. Nagar, Agartala.

Designation _____

Official Address _____

(with Rubber Stamp)

Identified by me

Subhra Deb
Advocate

Subhra Deb
Advocate

08/01/2026
(BINAY MAJUMDER)
NOTARY, Govt. of Tripura
Agartala, West Tripura.
Regd. No.-37 of 2017